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## BIB DATA SHEET

CONFIRMATION NO. 9203

<b>SERIAL NUMBER</b> 10/597,309	<b>FILING or 371(c) DATE</b> 07/20/2006 <b>RULE</b>	<b>CLASS</b> 702	<b>GROUP ART UNIT</b> 2857	<b>ATTORNEY DOCKET NO.</b> US040114		
<b>APPLICANTS</b> Walid Ali, Croton-on-Hudson, NY; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB05/50417 02/01/2005 which claims benefit of 60/541,688 02/04/2004 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/14/2008						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/Carol S. W. Tsai/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance CST Initials	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWINGS</b> 3	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> PHILIPS INTELLECTUAL PROPERTY & STANDARDS P.O. BOX 3001 BRIARCLIFF MANOR, NY 10510 UNITED STATES						
<b>TITLE</b> Method and System for Detecting Artifacts in ICU Patient Records by Data Fusion and Hypothesis Testing						
<b>FILING FEE RECEIVED</b> 1500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			